

Permission Slip



Graduation Party
June 4, 2008
Immediately following
graduation ceremony

Student's Name _____

Phone # _____

Phone # where parents can be reached
during the event _____

Parent's Name _____

Parent authorized to sign out your child
from this event _____

Parent Signature _____

*Please complete the bottom portion, tear and return it to school by
May 30th. This is required for your child's attendance to the event.*